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**UTILITY
PATENT APPLICATION
TRANSMITTAL**

(Only for new nonprovisional applications under 37 CFR § 1.53(b))

Attorney Docket No.	7404-602
First Inventor	CHAN, Frank A.
Title	PULSATING EXPRESSION CAP
Express Mail Label No.	EV 432598229 US

10/08/09 15324 U.S.P.T.O.

APPLICATION ELEMENTS

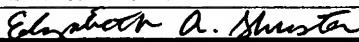
See MPEP chapter 600 concerning utility patent application contents

ADDRESS TO:
Mail Stop Patent Application
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

1. <input checked="" type="checkbox"/> *Fee Transmittal Form (e.g., PTO/SB/17) (submit an original and a duplicate for fee processing)	7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
2. <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.	8. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) <ul style="list-style-type: none"> a. <input type="checkbox"/> Computer Readable Form (CRF) b. Specification Sequence Listing on: <ul style="list-style-type: none"> i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> paper c. <input type="checkbox"/> Statements verifying identity of above copies
3. <input checked="" type="checkbox"/> Specification (preferred arrangement set forth below) <ul style="list-style-type: none"> - Descriptive title of the Invention - Cross References to Related Applications - Statement Regarding Fed sponsored R & D - Reference sequence listing, a table, or a computer program listing appendix or computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure 	9. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s))
4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets 10] <ul style="list-style-type: none"> <input type="checkbox"/> Informal <input checked="" type="checkbox"/> Formal 	10. <input type="checkbox"/> 37 C.F.R. § 3.73(b) Statement (when there is an assignee) <input type="checkbox"/> Power of Attorney
5. Oath or Declaration [Total Pages 2]	11. <input type="checkbox"/> English Translation Document (if applicable)
a. <input checked="" type="checkbox"/> Newly executed (original or copy)	12. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations
b. <input type="checkbox"/> Copy from a prior application (37 C.F.R. § 1.63(d)) (for continuation/divisional with Box 18 completed)	13. <input type="checkbox"/> Preliminary Amendment
i. <input type="checkbox"/> <u>DELETION OF INVENTOR(S)</u> Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §§ 1.63(d)(2) and 1.33(b).	14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized)
6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76	15. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed)
18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:	16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.
<input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP)	17. <input type="checkbox"/> Other: _____
Prior application information: Examiner: _____ Group / Art Unit: _____	

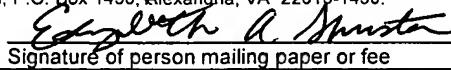
For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS

<input checked="" type="checkbox"/> Customer Number:	41577	OR	<input type="checkbox"/> Correspondence address below
Name	Woodard, Emhardt, Moriarty, McNett & Henry LLP		
Address	Bank One Center/Tower 111 Monument Circle, Suite 3700		
City	Indianapolis	State	IN
Country	USA	Telephone	(317) 634-3456
Name (Print/Type)	Elizabeth A. Shuster		Registration No. (Attorney/Agent)
Signature			Date
Elizabeth A. Shuster		March 25, 2004	

Express Mail Label Number EV 432598229 US**Date of Deposit March 25, 2004**

I hereby certify that this paper is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR Section 1.10 on the date indicated above and is addressed to the Commissioner for Patents, Mail Stop Patent Application, P.O. Box 1450, Alexandria, VA 22313-1450.


Signature of person mailing paper or fee

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FEE TRANSMITTAL FOR FY 2004

Effective 01/01/2003. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

Total Amount of Payment (\$ 1,008.00)

Complete if Known	
Application Number	Unknown
Filing Date	March 25, 2004
First Named Inventor	CHAN, Frank A.
Group Art Unit	Unknown
Examiner Name	Unknown
Attorney Docket Number	7404-602

METHOD OF PAYMENT

Check Credit card Money Other Order None

Deposit Account:

Deposit Account Number 23-3030

Deposit Account Name Woodard, Emhardt, Moriarty, McNett & Henry LLP

The Commissioner is authorized to: (check all that apply)

- Charge fee(s) indicated below Credit any overpayments
 Charge any additional fee(s) during the pendency of this application, excluding the payment of issue fees
 Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code	Fee Code	Fee Code	Fee (\$)
1051	130	2051	65
1052	50	2052	25
1053	130	1053	130
1812	2,520	1812	2,520
1804	920*	1804	920*
1805	1,840*	1805	1,840*
1251	110	2251	55
1252	420	2252	210
1253	950	2253	475
1254	1,480	2254	740
1255	2,010	2255	1,005
1401	330	2401	165
1402	330	2402	165
1403	290	2403	145
1451	1,510	1451	1,510
1452	110	2452	55
1453	1,330	2453	665
1501	1,330	2501	665
1502	480	2502	240
1503	640	2503	320
1460	130	1460	130
1807	50	1807	50
1806	180	1806	180
8021	40	8021	40
1809	770	2809	385
1810	770	2810	385
1801	770	2801	385
1802	900	1802	900
Other Fee (specify)			
* Reduced by Basic Filing Fee Paid			SUBTOTAL (3) (\$ 40.00)

SUBTOTAL (2) (\$ 968.00)

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SUBMITTED BY					Complete (if applicable)
Name (Print/Type)	Elizabeth A. Shuster	Registration No. (Attorney/Agent)	52,672	Telephone	(317) 634-3456
Signature		Date	March 25, 2004		

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